POSITION	INITIALS	ID NO.	DATE
	⟨AS⟩		08/29/⟨00⟩
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	⟨Q⟩	48	9/5/00
FORMALITY REVIEW		71531	10·27·00
RESPONSE FORMALITY REVIEW	⟨Zm⟩	60652 / 927	4-13-01 / 08 16 01

INDEX OF CLAIMS

✓ .... Rejected
= .... Allowed
– (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim				Date							
Final	Original	8/6/00	12/1/00								
1	1	✓	=								
2	2	0	=								
3	3	0	=								
4	4	✓	=								
5	5	●	=								
6	6	0	=								
7	7	✓	=								
8	8	0	=								
9	9	0	=								
10	10	0	=								
11	11	✓	=								
12	12	0	=								
13	13	0	=								
14	14	✓	=								
15	15	=	=								
16	16	=	=								
17	17	0	=								
18	18	=	=								
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Claim		Date								
Final	Original									
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Claim		– Date								
Final	Original									
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If more than 150 claims or 10 actions
staple additional sheet her

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